CLAIMS AS FILED - PART I (Column 1) (Column 2) FOTAL CLAIMS RATE FOR RUMBER FILED RUMBER FILED RUMBER DETTAL RATE FOR RUMBER FILED RUMBER FILED RUMBER DETTAL RATE FOR RUMBER FILED RUMBER DETTAL RATE FOR RUMBER FILED RATE RATE FILE RATE RATE RATE RATE RATE RATE ROTAL COLUMN 1 COLUMN 2 COLUMN 2 COLUMN 3 RUMBER DETTAL RATE	Application or Docket Number		
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DEPENDENT CLAIMS Column 1 is less than zero, anter 'U' in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED - PART II (Column 1) (Column 1) (Column 2) CLAIMS AS AMENDED - PART II (Column 3) REALIZED PRESENT FREQUENCY PRESENT PRESENT PRESENT PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM FRATE PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total United Present Prese	FILED NUMBER EXTRA BASIC FEE 355.00 OR BASIC FEE 710.00	NUMBER FILED NO	OR
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